



Updated Guidelines for Visitation

These visitation guidelines apply to nursing homes and community residential care facilities.* Residents of these facilities, as well as their families and friends, benefit emotionally, mentally, and physically from visitation with loved ones. DHEC continues to align our guidelines with the most recent [CMS visitation guidance](#) and [CDC guidance for COVID-19 in nursing homes](#). These DHEC guidelines supersede all previous versions of the DHEC visitation guidelines.

All facilities are required to allow visitation. Compassionate care visits, outdoor visits, window visits, and virtual visits must remain permitted in all scenarios, though the outdoor visits may be hindered by weather considerations or an individual resident's health status (e.g., medical condition(s), COVID-19 status). Compassionate care visits, outdoor visits, window visits, and virtual visits do not relieve facilities of the obligation to allow indoor visitation at all times and for all residents in accordance with these guidelines.

These guidelines reinforce adherence to the core principles of COVID-19 infection prevention, and clarify indoor visitation including close contact visits and visits during outbreak investigations.

*DHEC recommends that intermediate care facilities for individuals with intellectual disabilities also follow these guidelines. Additionally, CMS's visitation guidance specific to intermediate care facilities for individuals with intellectual disabilities can be found [here](#).

Core Principles of COVID-19 Infection Prevention

Facilities shall ensure that the facility, facility staff, residents, and visitors adhere to the core principles of COVID-19 infection prevention (listed below) at all times. Facilities shall develop and implement policies and procedures to address adherence to these core principles, including close contact visits and visits during outbreak investigations as described in the next section, in accordance with [CMS guidance](#).

Core Principles of COVID-19 Infection Prevention

- ☐ Visitors who have a positive viral test for COVID-19, symptoms of COVID-19, or currently meet the criteria for [quarantine](#), should not enter the facility. Facilities should screen all who enter for these visitation exclusions.
 - ☐ [Hand hygiene](#) (use of alcohol-based hand rub is preferred)
 - ☐ **Face covering** or masks (covering mouth and nose) and **physical distancing** of at least six feet between persons, in accordance with [CDC guidance](#)
 - ☐ **Instructional signage** throughout the facility and proper visitor education on COVID-19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene)
 - ☐ **Cleaning and disinfecting** of frequently touched surfaces often and of visitation areas after each visit
 - ☐ **Appropriate personal protective equipment (PPE)** use by staff
 - ☐ **Effective cohorting** of residents (e.g., separate areas dedicated COVID-19 care)
 - ☐ **Resident and staff testing** performed in accordance with [CMS guidance](#)
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Indoor Visitation

Facilities are required to allow indoor visitation at all times and for all residents. Facilities cannot limit the frequency and lengths of visits for residents, the numbers of visitors, or require advance scheduling of visits.

Although there is no limit on the number of visitors that a resident can have at a given time, facilities shall ensure visits adhere to the core principles of COVID-19 infection prevention to minimize risk to other residents. Facilities shall limit visitor movement within the facility and maintain physical distancing by advising visitors to go directly to a resident's room or designated visitation area. Additionally, facilities shall not host large gatherings or events where residents and visitors cannot maintain physical distancing.

If a resident's roommate is unvaccinated or immunocompromised, visits shall not be conducted in the resident's room. However, for situations where there is a roommate and the health status of the resident prevents leaving the room, facilities shall attempt to enable in-room visitation while adhering to the core principles of infection prevention.

Facilities shall allow residents, including unvaccinated residents, the option to have close contact (including touch) with their visitor if they both wear well-fitting face masks, perform hand hygiene before and after, and the visitor is physically distanced (maintaining at least 6 feet between people) from all other residents and facility staff. Facilities shall advise unvaccinated residents (or their representative) of the risks of physical contact prior to the visit. Visitors unable to adhere to the core principles shall not be permitted to visit or shall be asked to leave.

Indoor Visitation During an Outbreak Investigation

An outbreak exists when a new [nursing home or community residential care facility onset](#) of COVID-19 occurs (i.e., a new COVID-19 case among residents or staff).

When a new case of COVID-19 among residents or staff is identified, a facility shall immediately begin outbreak testing in accordance with [CMS guidance](#) and [CDC guidance](#).

While visitors shall be allowed in the facility during an outbreak investigation, facilities shall make visitors aware of potential risk of visiting during an outbreak investigation and requirement to adhere to the core principles of infection prevention at all times. This includes wearing masks or face coverings during visits, regardless of their vaccination status.

These guidelines for visitation at nursing homes and community residential care facilities (and recommended for visitation at intermediate care facilities for individuals with intellectual disabilities) are subject to modification or revocation at DHEC's discretion.